

Open enrollment begins October 10

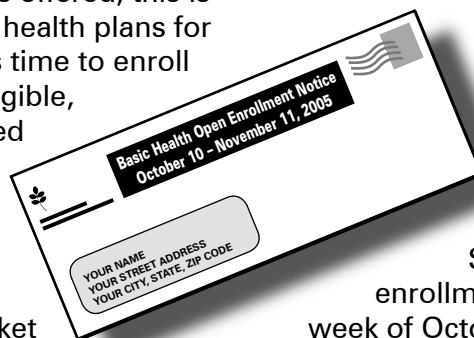
Basic Health's open enrollment period is coming soon: October 10 through November 11. For those living in areas where more than one plan is offered, this is your opportunity to change health plans for 2006. Everyone can use this time to enroll family members who are eligible, and are not currently covered by Basic Health.

For the second year in a row, there are no changes to your benefits. Copays, deductibles, and out-of-pocket maximums will remain the same. Copays for prescription benefits will not change; however, your health plan's approved list of covered drugs may change with the new calendar year. Contact your health plan for more information.

Be sure to review the information in your open enrollment notice. It will tell you what

your premium will be for January 2006, what health plans are available to you, and what action, if any, you need to take. Any changes you make during open enrollment will take effect January 1, 2006. This means your premium may change on the bill you receive in November, due December 5.

So watch the mail for your open enrollment notice. It should arrive the week of October 10.

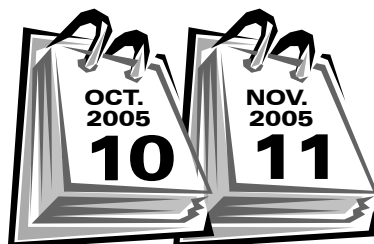


Reminder: Your deductible and out-of-pocket maximum for each covered family member will start over with the new calendar year for those benefits and services subject to deductible and coinsurance.

Important dates to remember



October 7
Open enrollment booklets mailed



October 10 – November 11
Open enrollment — when members can make health plan changes and add family members



January 1
New premiums and health plans take effect



Mid-January & February
Member Handbook mailed



This serves as an official notice of changes to your Basic Health coverage, and is an addendum to your *Member Handbook*.

Things that could affect your premium for 2006

Several things may change your premium for 2006. Among them:

- If you change health plans;
- If you add coverage for a family member who isn't currently enrolled on your account;
- If you or an enrolled family member reached age 40, 55, or 65 during 2005 (premium changes based on the member's age take effect January of the following year, regardless of when the birthday is); or
- If you or a family member gains or loses eligibility for Basic Health, Basic Health *Plus*, or the Maternity Benefits Program.

Health plan contact information

If there are things that are important to you when choosing a health plan — like keeping your doctor, coverage for certain medications, or whether they offer wellness education classes — be sure to call the health plan and ask about them.

Health plan	Phone numbers	Web site	Customer service hours
Columbia United Providers, Inc.	1-800-315-7862 or 360-891-1520 TTY/TDD: 1-866-287-9962	www.cuphealth.com	Mon. – Fri. 8 a.m. – 5 p.m.
Community Health Plan of Washington	1-800-440-1561 TTY/TDD: 1-800-833-6388	www.chpw.org	Mon. – Fri. 8 a.m. – 6 p.m.
Group Health Cooperative	1-888-901-4636 TTY/TDD: 1-800-833-6388	www.ghc.org	Mon. – Fri. 8 a.m. – 5 p.m.
Kaiser Foundation Health Plan of the Northwest	1-800-813-2000 TTY/TDD: 1-800-324-8010	www.kaiserpermanente.org	Mon. – Fri. 8 a.m. – 6 p.m.
Molina Healthcare of Washington, Inc	1-800-869-7165 TTY/TDD: 1-877-665-4629	www.molinahealthcare.com/washington	Mon. – Fri. 7:30 a.m. – 5:30 p.m.

Si desea ayuda en español, llame al 1-800-321-0291. Для обслуживания на русском языке, позвоните, пожалуйста, по телефону 1-800-387-8224.

한국어로 도움을 원하시면 1-800-324-1658로 연락하십시오. Nếu quý vị muốn được giúp bằng tiếng Việt, xin gọi số 1-800-423-2231.

To obtain this document in another format, call our Americans with Disabilities Act (ADA) Coordinator at 360-923-2805.
TTY users (deaf, hard of hearing, or speech impaired), call 360-923-2701 or toll-free 1-888-923-5622.